FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

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2014 OCT 20 AM 9: 54

COMMITTEE NAME (Must be same as on Statement of Organization	on)		
COMMITTEE TO ELECT VAN U		1	FORM
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State (4) County Central Committee (5) County Candidate (6) City Candidate (Subdivision Candidate (8) County PAC (9) City PAC (10) School Board of 11) Local Ballot Issue	PAC (3)State Party	. 1	DR-2 (Rev. 12/2009) DISCLOSURE REPORT For Office Use Only
CANDIDATE COMMITTEES ONLY:			Comm. # 19360
Candidate Name	Political Party (if applicable)		Logged In
MINITIASIZA COOK 17 SOFER VISOR	District (if Senate or House)		Computer
Late reports are subject to possible civil and criminal penalties. Pursuant translidate's committee, and the chairperson, for any other type of committee.	ee, is the marvidual responsible	(7) and 68 for filing	8A.401(3), the candidate, for a timely and accurate reports.
GIGNATURE OF PERSON FILING REPORT	71-660 -1144 TELEPHONE		10-13-2014
NONATORE OF PERSON FILING REPORT	TELEPHONE	_	DATE SIGNED
AM FILING A OCTOBER 19, 2014 R (report date) CHECK IF AMENDMENT TO REPORT DATED 10-27-14	Indicate by #	‡ [1]	-ELECTION YEAR.
Check if this is final (termination) report and attach Notice of Disso (You must continue to file reports until a DR-3 is filed.)	lution Form DR-3.	No County & I which Elec	Local Committees, enter County in stion is held
STATEMENT OF CASH ON HAND			
ASH ON HAND at the beginning of the reporting period. (Total of all committee. This amount MUST be the same as the cash on of the last reporting period or must be zero if this is first report			0
ADD TOTAL MONEY TAKEN IN THIS PERIOD	(tilled.)	\$	
Schedule A: Cash Contributions total (Attach Schedule A) (*	also see in-kind holow)		1 6/15 00
Collecture F. Loans Received total (Attach Schedule F)			1,045,00
Schedule H: Total Sales of Campaign Property (Attach Sche	dule H)	********	330.00
(Schedule H applies to Candidates' Committees	Only)		
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	SUB-TOTAL	\$	4595
Schedule B: Expenditures total (Attach Schedule B) (**also s	6.5		
Schedule F: Loan Repayments total (Attach Schedule F)	ee debts and loans below)	******	783,90
SH ON HAND at the end of this reporting period (if final report balar			4 X 11 10
	ice must be zero)		
NPAID BILLS (From Schedule D - Attach Schedule D)	ice must be zero)		
CONTRIBUTIONS (From Schedule E - Attach Schedule E)		\$	
CONTRIBUTIONS (From Schedule E - Attach Schedule E)		\$	- 011-10
DUTSTANDING LOANS (From Schedule E - Attach Schedule E)		\$	
DUTSTANDING LOANS (From Schedule E - Attach Schedule E) DUTSTANDING LOANS (From Schedule F - Attach Schedule F) DINSULTANT BREAKDOWN (Schedule G Attached?) NDIDATE COMMITTEES ONLY:		\$	YES NO
JNPAID BILLS (From Schedule D - Attach Schedule D)	tule H)	\$ \$	YES NO

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

Reset Form	SCHEDULE A (Rev. 12/13)	MONETARY RECEIPTS
		CK THIS BOX IF

COMMITTEE	MARKE				
COMMITTEE	NAME	Must	be same	as on	Statement of Organization)
1					ordinate of Organization)

Committee To ELECT VAN WEELDEN

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

10# Jane Nicholson 100 00 10 10 10 10 10 10	RECEIVED (MM/DD/YR)	NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FUND
10# VERNOW WELLS 100 00	01	ID#	JANE NICKAL STA			RAISE
9/31/14 CK# TONY KONCH COCKE THE TOWN TOWN KONCH COCKE THE TOWN TOWN TOWN TOWN TOWN TOWN TOWN TOWN	1/18/14	CK#	2396 Pugnin PATH			
9/21/14 ID# TONY KUNZ 05802N AU D 06802N A	9/01	ID#	Verivor		200,00	
Teny Kun 2	1/8/14	CK#	714 FOXRON			
10#	9/211	ID#			10000	
10# CK# 2527 235 1 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	114	CK#	OSBORN AUD			Г
10# CK# 2527 235 11 EF 50.00	2/201	ID#	KENGROON BOAR		100 00	
10 10 10 10 10 10 10 10	174	CK#	2327 235 H ST			
10#	/.	ID#	JON SOLLIONS		50.00	
ID# SKALOSA FA SO.00 S	20/14	CK#	LXNOANA ACRES		20.0	
10# TORE ME NEDBASM 120.00		ID#			05.00	
Tereme NEDBASM 120.00	14/14	CK#				
13/14 CK# TOPLES A NICES SHAKEN FA 120.00 13/14 CK# 1604 SI PAZK 25.00 13/14 CK# 16/1 HIGHLAND 25.00 10# 05KALBOSA FA 10# 05KALBOSA FA 10/14	1/41	ID#	TORING ONE DELLA FA		50.00	
13/14 CK# Terres A NIELSEA 1604 S. PAZIK CSKA LOOSA FA 16/1 Hight AND 25:00 10# 10# MIKE Theobar FA 12/14 CK# 317 Itigh Ace E	/14	CK#	510 N PARK			
ID# OSKALOOSA FA ICK# 16/ HighLAND OSKALOOSA FA ID# MIKE Theo BALD 35.00 IZ/14 CK# 317 High Ace E	1/3/	ID#			120.00	
ID# CK# ID# ID# CK# ID# ID# ID# ID# ID# ID# ID# I		CK#	1604 5, PARK			
ID# OSKALOOSA FA MIKE THEO BALD 317 High Ace E	121		JANALOOSA FA		25.00	
ID# CK# CK# Thro BALD 12/14 CK# 317 Itigh Ace 5	114	CK#	161 HighLAND		25,00	
2/14 CK# 317 1+19h Ace 5	/	ID#	MIKE THE BLOOM			
	2/14	CK#	317 High Ace E CSKALCOSIT FIT		50,00	

TOTAL (if last page of this schedule)

\$ 745

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by applicable* in the relationship column.

(for Schedule A) Page / of 2 familial relationship,

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SCHEDULE	
A (Rev. 12/13)	MONETARY RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

COMMITTEE	NAME (Must be	same as on	Statement of Organization)	
Comm.	TTER TO	ELECT	VAN WEELDEN	

CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

FOR DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FUND- RAISER INCOME
10/08/14	ID#	JOLENY FENCIL 2452 OTTER HILLS LANG		\$ 100.00	The State of the S
	ID#	BLAIR VAN LETTEN			
10/08/14	CK#	1802 N PARIL OSKALEDDA FA		100.00	
16/08/	ID#	BECKY SIEGERINZ 4 PARK PLACE		100.00	
7/14	ID#	CSKALOOSA TA		700.00	
	CK#				
	ID#				
	CK#				
	CK#				
	ID#				
****	CK#				
	ID#				
	ID#				
	CK#				
	ID#				
Rimeron at all and a contract of a contract	CK#				

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no applicable" in the relationship column. (for Schedule A)

Page_ of A familial relationshi FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE	
(Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

Commi	Thee TO E	Lect VAN WeelDen		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/18/14	ID# CK# 00/	KAESER & BLAIR INC 4236 GRISSOM DR BATAVIA OHIO 45703	YARD SANS Pens	\$ 783,90
	CK#			
	ID# CK#		e e e e e e e e e e e e e e e e e e e	
	ID# CK#			
	ID# CK#			
			SUB-TOTAL TOTAL (if last page of this schedule)	\$ 783,90

THIS	BOX	APPI	IFS T	0.0	CANDID	ATES'	COMMITTEES	ONI V.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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FOR INSTRUCTIONS, SEE BACK OF FORM	RESET	SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization) COMMITTEE TO FLECT VAN WEELDEN		(Rev. 02/08)	LOANS RECEIVED & REPAID
NOTE: This schedule reports money loaned to the committee which is deposited in the committee act TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$	ccount.	CHECK 1	THIS BOX IF IG FORM
PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD			

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
07/08/2014	HENRY W VAN WEELDEN 2681 210 TH ST NEW SHARON JA 50207	Sea F	550,00

TOTAL (PART I)

\$ 550.00

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II)	\$
From Schedule E TOTAL LOANS FORGIVEN	\$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 550.00

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	(for Schedule F)